

KANSAS CITY MISSOURI POLICE DEPARTMENT  
**EMPLOYER'S APPLICATION FOR EMPLOYMENT OF PRIVATE SECURITY OFFICER**  
**"INTENT TO HIRE"**

TO: KANSAS CITY MISSOURI BOARD OF POLICE COMMISSIONERS

FROM: \_\_\_\_\_

**Name of Employer**

Number, Street, City, Zip Code

Telephone

E-Mail Address

Employee: \_\_\_\_\_

Name

Date of Birth

Social Security Number

Number, Street

City/State

Zip Code

Telephone/Email Address

As an authorized representative of the employer, I understand that registration and licenses are canceled automatically in the absence of required insurance. The employer agrees that it will furnish the Board a description of all weapons used by its employees. Any corporation, partnership, or other entity that provides private security services and proprietary private investigative services is fully responsible for the acts and omissions of its employees acting in the course and scope of their duties. Training is the responsibility of the entity hiring such employees. The Board is a licensing agency, not an employer, and assumes no responsibilities for the acts or omissions of any entity or individual providing such services. The Board's functions are limited to licensing and regulating any entity or individual who perform such services. The employer accepts full responsibility for the physical and mental capabilities of its employees, and understands the company is accountable for the conduct of its employees. The employer requests the above named person be considered for: (Please check appropriately).

**Class A**

☐ Loss Prevention-Unarmed/Non-uniformed

☐ Patrol Agent/Uniformed

☐ Armed

☐ Unarmed

☐ Proprietary Private Investigator/Non-uniformed

☐ Armed

☐ Unarmed

☐ Airport Police-Armed/Uniformed

☐ TCO-Unarmed/Uniformed

**Class B**

☐ Guard-Unarmed/Uniformed

☐ Armed Courier/Uniformed

☐ Proprietary Private Investigator/Non-uniformed

☐ Armed

☐ Unarmed

As an authorized representative of the employer, I request the employee be authorized, after completion of the background investigation, and after meeting the qualification, to carry:

Make

Model

Caliber

Serial #

Notice to Employee: ONE of the following weapons may be carried only when you are working; 38 caliber, double action solid frame revolvers (5 or 6 shot) and semi automatic, double action only or double/single action which are equipped with a decocker or decocker safety. This limits selection to calibers 40, 45, and 9mm. The weapon may only be carried when you are working in uniform, only on the premises you are hired to protect, and only when authorized. You should travel directly to and from work by the most direct route and you should lock the unloaded weapon in the trunk or glove box while not working in the capacity of private security/proprietary private investigator and representing the company whose name appears on my license.

Signature of Employee \_\_\_\_\_

All licenses issued are temporary until the background investigation, criminal history record check and firearms qualifications are completed. The license may be canceled without notice, with reasonable cause, at any time.

Signature of authorized representative of the Employer

Date

Position